

APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws. Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or the presence of a non-job related medical condition or handicap.

Date of Application / /

Position(s) applied for: _____

Name _____ Social Security No. _____
Last First Middle

Address _____
Street

City State Zip Phone: _____

Are you a U.S. Citizen? Yes No If not, do you possess an alien registration card? Yes No

Date of Birth _____ Can you provide proof of age? Yes No

In case of emergency, notify: _____
Name Phone No. Relation

Have you worked for this company before? Yes No If so, Dates: From _____ To _____

Rate of pay _____ Position _____ Reason for Leaving _____

Are you currently employed? Yes No If no, how long since last employed? _____

Are you currently on a "Layoff" status and subject to recall? Yes No

On what date would you be available to work? _____ Expected rate of pay _____

Union Member? Yes No Union (Local) Name _____

Address _____

Business Agent's Name _____ Phone Number _____

Union Status _____ Current Rate of pay _____

Card or Initiation Fee Yes No Balance Remaining _____

Is there any reason you might be unable to perform the functions you have applied for, including heavy physical labor, extreme weather conditions or working on elevated areas? Yes No

If yes, please explain: _____

Would you be willing to take a physical examination? Yes No

DRIVING EXPERIENCE

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	DATES		APPROX NO MILES (TOTAL)
		FROM	TO	
Dump Truck				
Straight Truck				
Tractor and Semi Trailor				
Other				

List states operated in for last five years _____

List any special courses or training that will help you as a driver _____

Please list any accidents in the past 3 years: _____

EXPERIENCE AND QUALIFICATIONS – ROOFING

Please indicate any experience or qualifications that would pertain to Roofing or Exterior work:

PERSONAL REFERENCES – KNOW 5+ YEARS
(PLEASE LIST ANYONE NOT IN YOUR HOUSEHOLD)

Name & Phone _____

Address _____

Relationship _____

Name & Phone _____

Address _____

Relationship _____

Name & Phone _____

Address _____

Relationship _____

**KNIPP ROOFING & EXTERIORS, INC IS A DRUG FREE WORKPLACE.
EACH EMPLOYEE IS REQUIRED TO TAKE A SUBSTANCE ABUSE TEST UPON EMPLOYMENT.**

TO BE READ AND SIGNED BY APPLICANT

This certifies that this application was completed by me and that all entries on it and information provided in it are true and complete to the best of my knowledge.
I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the Company, as permitted by Law.

Applicant's Signature

Date